Implementation of the Skills Iowa Technology Grant Program Request for Proposal SI-001 May 20, 2008

The lowa Department of Education, Grimes State Office Building, Des Moines, Iowa 50319, will be receiving proposals **to implement the Skills Iowa Technology Grant Program** until 3:00 p.m. local Iowa time, Monday, June 23, 2008. Late proposals will not be considered.

For information regarding this notice, contact Issuing Officer:

Jeff Berger Iowa Department of Education Grimes State Office Building 400 E 14th St Des Moines, IA 50319 Phone: 515-281-3399

E-mail: jeff.berger@iowa.gov

Table of Contents

| Section 1 | Administrative | Issues |
|-----------|----------------|--------|
| | | |

- 1.1 Purpose
- 1.2 Questions and Answers
- 1.3 Issuing Officer
- 1.4 Letters of intent to apply
- 1.5 Submission of proposals
- 1.6 Proposal opening
- Section 2 Service Requirements
 - 2.1 Scope of work
 - 2.2 Eligible applicants
- Section 3 Content of Proposal
 - 3.1 Instructions
- Section 4 Evaluation Steps
 - 4.1 Evaluation Criteria
- Section 5 Contract Terms and Conditions
 - 5.1 Contract Terms
 - 5.2 Length of Contract

Attachments

- 1. Contract Terms and Conditions
- 2. Proposal Certification
- 3. Certification of Independence and No Conflict of Interest
- 4. Certification Regarding Debarment, Suspension, and Eligibility and Voluntary Exclusion
- 5. Authorization to Release Information

Section 1 Administrative Issues

- **1.1 Purpose.** The Iowa Department of Education (DE) seeks a contractor/vendor to implement the Skills Iowa Technology Grant Program as established by the 2008 Iowa General Assembly in Senate File 3303.
- **1.2 Questions and Answers** Vendors are invited to submit written questions and/or requests for interpretations concerning this RFP on or before 4:30 p.m. local lowa time, June 9, 2008. Oral questions will not be accepted, and verbal communications shall not override written/e-mail communications. The DE will prepare a written response via e-mail to all pertinent questions submitted by vendors by June 13, 2008.
- **1.3 Issuing Officer.** All questions, letters of intent, and proposals should be submitted to:

Jeff Berger
Iowa Department of Education
Grimes State Office Building
400 E 14th St
Des Moines, Iowa 50319
515-281-3399
ed.rfp@iowa.gov

- 1.4 Letters of intent to apply. A letter indicating intent to apply must be received no later than 4:30 p.m. Monday, June 2, 2008. The letter may be delivered via electronic mail (e-mail), postal delivery, or hand delivery. The letter of intent to apply must include the vendor's name, mailing address, e-mail address, telephone number, and a statement of intent to apply. Submitting a letter of intent to apply is a mandatory condition to submit a apply proposal.
- **1.5 Submission of proposals.** Proposals must be received at the DE no later than 3:00 p.m. local lowa time, Monday, June 23, 2008. Proposals may be submitted via electronic mail (e-mail), postal delivery, or hand delivery. A late proposal shall be returned to the vendor and will not be considered.
- **1.6 Proposal opening.** Proposals will be opened on June 24, 2008. The proposals will remain confidential until the DE evaluation committee has reviewed all of the apply proposals, per Iowa Code Section 72.3.
- 1.7 Timeline:

| May 21, 2008 | RFP Released to Targeted Small Businesses |
|---------------|---|
| May 23, 2008 | RFP Released to General Public |
| June 2, 2008 | Letters of Intent due to Department |
| June 6, 2008 | Questions due to Department |
| June 9, 2008 | Answers released to vendors filing letter of intent |
| June 13, 2008 | Bid Proposals due to Department |
| June 16, 2008 | Bid Proposals Opened and Scored |
| June 18, 2008 | Notice of Intent to Award and Contract Negotiation |

Section 2

Service Requirements

- **2.1 Scope of work.** The DE seeks applications on implementing the Skills Iowa Technology Grant Program as outlined in Senate File 3303. Per the legislation, the intent of the application is to "continue the skills Iowa technology grant program previously known as the follow-the-leader technology grant program."
 - Amount to be contracted with the vendor is \$500,000 to provide services to lowa school districts and schools per the Skills Iowa Technology Program
 - Time period of implementation is July 1, 2008, through June 30, 2009 (one year)
 - The purpose of the program is to provide assessment and remediation tools to classrooms, to enhance teachers' ability to easily assess the skill levels of individual students and prescribe individualized instruction plans based on those assessments, and provide for professional development of teachers.
- **2.2 Eligible applicants.** Per Senate File 3303, the eligible applicant must be a not-for-profit entity with at least two years experience with the skills lowa technology grant program and in providing technical assistance to schools in lowa.

Section 3 Content of Proposal

- **3.1 Instructions.** The proposal shall include the following:
 - **3.1.1.1** Statements that demonstrate that the vendor understands and agrees with the terms and conditions of the RFP.
 - 3.1.1.2 A demonstration/description of the vendor's minimum experience of two years with Skills Iowa Technology Program
 - 3.1.1.3 Description of the vendor's qualifications to complete the work. The vendor should describe how previous work experiences coincide with the requirements of this application. Included in this work should be a description of how the vendor has been engaged in similar work.
 - **3.1.1.4** Names and qualifications (resumes/vitas) of key staff members and/or contractors who will perform the duties.
 - **3.1.1.5** Budget outlining how the \$500,000 will provide services to lowa school districts and schools

Section 4 Evaluation Steps

- **4.1 Evaluation criteria.** The DE evaluation committee will evaluate all compliant proposals and make an award using the following criteria which are listed in no particular order:
 - 4.1.1 Total points to be earned=100 points
 - **4.1.1.1** Proven experience/track record of vendor in related initiatives=60 points
 - **4.1.1.2** Experience of key staff members and/or contractors=40 points

4.1.2 Recommendations of evaluation committee. The final ranking and recommendation of the evaluation committee shall be presented to the Division Administrator, PK-12 Education for consideration.

Section 5 Contract Terms and Conditions

- **5.1 Contract terms.** The contract is attached in Appendix B.
- **5.2 Length of contract.** It is anticipated that this contract will be for one year, depending upon funding continuation. Contract is anticipated to begin July 1, 2008, and terminate June 30, 2009.

Contract Terms and Conditions

| | | | | | | | igiccinci | ιι π | |
|--|---|---|---|---|---|---|-----------|--|---|
| | | | | TUAL AGREI ETWEEN | EMENT | | | | |
| Grimes State | IOWA, DEPAR e Office Bldg., 4 Contact Person | 100 E 14 th St, | Des Moines, I | A 50319-014 | 6. | | | | |
| ADDRESS: CITY, STA | ΓΙΝG PARTY - ΓΕ, ΖΙΡ: CONTACT PER | Phone: | _ | | - | CES: | | | |
| CONTRAC | TING PARTY: | | IVIDUAL, YO FAN AGENC | | | _ | | | |
| CONTRAC' | RTMENT WIL TING PARTY: TION OF SERV | | | E FOLLOWI | NG SERVICI | ES RENDERI | ED BY | | |
| CONTRAC' | T PERIOD: Se | rvice begins: | Servi | ce ends: | | | | | |
| \$0.00 ASSOCIAT Conditions a \$ TI \$ M \$ L0 \$ C | Costs' Contr \$ CONT ED COSTS: Or and Requirement RAVEL: FROM via meator Coate | act is for actual section. act is for a specific per | al costs estima crified fee tota (Unit) OT TO EXCE esignated are Estimated cost AND amounts show uto \$' (As stipulated; not to exceed unch \$, not to exceed | ted as shown lling the show ED AMOUNT covered; requ s shown) RETURN vn: Taxi \$ d in "Descript the followin Dinner \$ | here in total a n amount for SHOWN Of ired documen Parking \$ ion of Service g rates: | (Num N THIS LINE tation is indicated by the series of the | ber) | der "Associated (Units) at er "Other | |
| Payment req | uests should be | submitted to | the attention o | f: | | | | | |
| | | | *FOR DE | PARTMENT | OF EDUCAT | TON USE ON | ILY* | D. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| FUND | AGENCY | ORGN | S/ORG | OBJ | ARC | AMOUN | VТ | PAYMENTS | _ |
| TOND | 0282 | ORGIV | 5/ORG | OBJ | TIRC | Alviooi | 11 | | |
| | 0282 | | | | | | | | |
| | 0282 | | | | | | | | |
| | 0282 | | | | | | | | |
| | _1 | | TOTAL CON | TRACT AM | OUNT | \$0.00 | | | |
| PRE-CO | ONTRACT | | OURCE | PRIOR APP | | | | | |
| (ATTACH | (ATTACHED OR N/A) (ATTACHED OR N/A) (ATTACHED OR N/A) | | D OR N/A) | | | | | | |

OTHER CONDITIONS/REQUIREMENTS: Unless otherwise stipulated, the rates and requirements listed below shall apply:

Mileage reimbursement rate: 34 ¢ per mile.

Original Receipts: Must be submitted with a signed claim when the contract is with an individual. Receipts are required for the following: (Credit card receipts are not acceptable)

TRAVEL: Air coach, taxi fares, related parking fees and car rental.

LODGING: Reimbursement approved only for those residing outside the designated meeting site. Lodging must be outside contracting party's domicile.

OTHER: Registration fees and other items (as designated under "Associated Costs" section) require receipts unless specified otherwise.

<u>Itemized Invoice</u>: <u>An agency must submit an itemized invoice detailing the expenses allowed by the contract.</u>

ALL CLAIMS MUST BE FILED WITHIN 30 DAYS FOLLOWING THE CONTRACT SERVICE ENDING DATE.

TERMINATION: This contract may be terminated by either party upon ten- (10) days written notice.

NONTRANSFERENCE: Unless otherwise stipulated in this contract, the contracting party shall not transfer any interest in this contract without prior written approval from the Department of Education.

AMENDMENTS: Requests for an approval of amendments to this agreement must be mutually acceptable and in writing.

INDEMNIFICATION: The contracting party agrees jointly and severally to indemnify and hold the State, it successors and assigns harmless from and against all liability, loss, damage, or expense, including reasonable counsel fees, which the State shall incur by reason of the failure of the contracting party to perform fully and comply with the terms and obligations of this agreement.

AVAILABILITY OF FUNDS: This contract is subject to the anticipated availability of Federal and/or State funds under the program from which it is supported.

ASSURANCE: THE CONTRACTING PARTY, BY SIGNATURE AFFIXED BELOW, ASSURES THE DEPARTMENT THAT SAID CONTRACTING PARTY IS OPERATING IN COMPLIANCE WITH ALL APPLICABLE FEDERAL, STATE, AND LOCAL STATUTES, RULES AND REGULATIONS. INCLUDING CERTIFICATION THAT THE CONTRACTOR AND/OR ITS PRINCIPAL OFFICIALS ARE NOT SUSPENDED OR DISBARRED.

REPRESENTATIONS: VERBAL OR WRITTEN, THAT MAY HAVE BEEN MADE PRIOR TO THE SIGNING OF THIS CONTRACT AND ARE NOT EXPRESSLY STATED IN THE TERMS OF THE CONTRACT, ARE NONBINDING, VOID AND OF NO EFFECT. NEITHER PARTY HAS RELIED ON SUCH PRIOR REPRESENTATIONS IN ENTERING INTO THIS CONTRACTUAL AGREEMENT.

| DE CONTACT (Requesting service) | TITLE | // DATE |
|--|-------|------------|
| DE ADMINISTRATION TITLE | DATE | // |
| CONTRACTING AGENCY OR INDIVIDUAL | TITLE | DATE |
| DE AUTHORIZING SIGNATURE | TITLE | // DATE |
| CONTRACTING PARTY: SIGN, DATE, AND RECONTRACT WILL BE VALID WHEN YOU RECAUTHORIZING SIGNATURE. | | |

AGREEMENT #

Date

Jeff Berger, Issuing Officer Iowa Department of Education Grimes State Office Building East 14th and Grand Avenue Des Moines, IA 50319-0146

Re: Request for Proposal Number #SI-001 PROPOSAL CERTIFICATION

Dear Jeff Berger:

I certify that the contents of the proposal submitted on behalf of (Name of Vendor) in response to the Iowa Department of Education for Proposal Number SI-001 to implement the Skills Iowa Technology Grant Program. I also certify that (Name of Vendor) has not made any knowingly false statements in its proposal.

| Name and Title | | |
|----------------|------|--|

Date

Jeff Berger, Issuing Officer Iowa Department of Education Grimes State Office Building East 14th and Grand Avenue Des Moines, IA 50319-0146

Re: Request for Proposal Number #SI-001

CERTIFICATION OF INDEPENDENCE AND NO CONFLICT OF

INTEREST

Dear Jeff Berger:

By submitting a proposal in response to the Iowa Department of Education Request for Proposal Number SI-001 to implement the Skills Iowa Technology Grant Program, the undersigned certifies the following:

- 1. The proposal has been developed independently, without consultation, communication or agreement with any employee or consultant to the Agency who has worked on the development of this RFP, or with any person serving as a member of the evaluation committee.
- 2. The proposal has been developed independently, without consultation, communication or agreement with any other vendor or parties for the purpose of restricting competition.
- 3. Unless otherwise required by law, the information found in the proposal has not been knowingly disclosed and will not be knowingly disclosed prior to the award of the contract, directly or indirectly, to any other vendor.
- 4. No attempt has been made or will be made by (Name of Vendor) to induce any other vendor to submit or not to submit a proposal for the purpose restricting competition.
- 5. No relationship exists or will exist during the contract period between (Name of Vendor) and the Agency that interferes with fair competition or as a conflict of interest

| 5. | No relationship exists or will (Name of Vendor) and the Ag as a conflict of interest. |
|---------------|---|
| Sincerely, | |
| Name and Titl | e |

Date

Jeff Berger, Issuing Officer Iowa Department of Education Grimes State Office Building East 14th and Grand Avenue Des Moines, IA 50319-0146

Re: Request for Proposal Number #SI-001

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND ELIGIBILITY, AND VOLUNTARY EXCLUSION

Dear Jeff Berger:

By submitting a proposal in response to the Iowa Department of Education's Request for Proposal Number #SI-001 to implement the Skills Iowa Technology Grant Program, the undersigned certifies the following:

- 1. I certify that, to the best of my knowledge, (Name of Vendor) and all of its principals: (a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by a Federal Agency or agency; (b) have not within a three year period preceding this proposal been convicted of, or had a civil judgment rendered against them form commission of fraud, or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction, violation of antitrust statutes or commission of embezzlement, theft, forgery, falsification or destruction of records, making false statements, or receiving stolen property; (c) are not presently indicted for or other criminally or civilly charged by a government entity (federal, state, or local) with the commission of any of the offenses enumerated in (b) of this certification; and (d) have not within a three year period preceding this proposal had one or more public transactions (federal, state, or local) terminated for cause.
- 2. This certification is a material representation of fact upon which the Agency has relied upon when this transaction was entered into. If it is later determined that the undersigned knowingly rendered an erroneous certification, in addition to other remedies available, the Agency may pursue available remedies including suspension, debarment, or termination of the contract.

| Sincerely, | | |
|----------------|------|--|
| | | |
| Name and Title | | |

Date

Jeff Berger, Issuing Officer Iowa Department of Education Grimes State Office Building East 14th and Grand Avenue Des Moines, IA 50319-0146

Re: Request for Proposal Number #SI-001

AUTHORIZATION TO RELEASE INFORMATION

Dear Jeff Berger:

[name of vendor] hereby authorizes the Iowa Department of Education to obtain information regarding its performance on other contracts, agreements or other business arrangements, its business reputation, and any other matter pertinent to evaluation and the selection of a successful vendor in response to Request for Proposal Number #SI-001.

The vendor acknowledges that it may not agree with the information and opinions given by such person or entity in response to a reference request. The vendor acknowledges that the information and opinions given by such person or entity may hurt its chances to receive contract awards from the Agency or may otherwise hurt its reputation or operations. The vendor is willing to take that risk.

The vendor hereby releases, acquits and forever discharges the State of Iowa, the Agency, their officers, directors, employees and agents from any and all liability whatsoever, including all claims, demands and causes of action of every nature and kind affecting the undersigned that it may have or ever claim to have relating to information, data, opinions, and references obtained by the Agency in the evaluation and selection of a successful vendor in response to Request for Proposal Number #SI-001.

The vendor authorizes representatives of the Agency to contact any and all of the persons, entities, and references which are, directly or indirectly, listed, submitted, or referenced in the undersigned's proposal submitted in response to Request for Proposal Number #SI-001.

The vendor further authorizes any and all persons, entities to provide information, data, and opinions with regard to the undersigned's performance under any contract, agreement, or other business arrangement, the undersigned's ability to perform, the undersigned's business reputation, and any other matter pertinent to the evaluation of the undersigned. The undersigned hereby releases, acquits and forever discharges any such person or entity and their officers, directors, employees and agents from any and all liability whatsoever, including all claims, demands and causes of action of every nature

| and kind affecting the undersigned that it may have or ever claim to have relating to information, data, opinions, and references supplied to the Agency in the evaluation and selection of a successful vendor in response to Request for Proposal Number #SI-001. |
|---|
| A photocopy or facsimile of this signed Authorization is as valid as an original. |
| Sincerely, |
| Printed Name of Vendor Organization |
| Name and Title of Authorized Representative Date |